

B 1 (Official Form 1) (1/08)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): <i>Jensen, Kirsten, M</i>		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <i>Jensen, Kiri</i>		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <i>3381</i>		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): <i>1322 Dearborn Street Joliet, IL</i> <div style="text-align: right;">ZIP CODE <i>60435</i></div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP CODE</div>
County of Residence or of the Principal Place of Business: <i>Will</i>		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP CODE</div>
Location of Principal Assets of Business Debtor (if different from street address above): <div style="text-align: right;">ZIP CODE</div>		
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable.)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 9      Recognition of a Foreign <input type="checkbox"/> Chapter 11      Main Proceeding <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 13      Recognition of a Foreign Nonmain Proceeding  <hr/> <b>Nature of Debts</b> (Check one box.)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.
<b>Filing Fee</b> (Check one box.)  <input type="checkbox"/> Full Filing Fee attached.  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input checked="" type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000.  <hr/> <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
<b>Statistical/Administrative Information</b>  <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
<b>Estimated Liabilities</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <u>Kirsten M. Jensen</u>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)			
Location Where Filed: <u>Northern District-Will County</u>	Case Number: <u>01 B 09316</u>	Date Filed: <u>03/05/2001</u>	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District: <u>Northern District of Illinois</u>	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).  X <u>N/A</u> Signature of Attorney for Debtor(s) (Date)	
<b>Exhibit C</b>			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.			
<input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(i)).			

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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): <u>Kirsten M. Jensen</u>
<b>Signatures</b>		
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.                  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.                  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>Kirsten Jensen</u>                  Signature of Debtor</p> <p>X _____                  Signature of Joint Debtor</p> <p>_____                  Telephone Number (if not represented by attorney)</p> <p>_____                  Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only <b>one</b> box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X <u>N/A</u>                  (Signature of Foreign Representative)</p> <p>_____                  (Printed Name of Foreign Representative)</p> <p>_____                  Date</p>	
<p style="text-align: center;"><b>Signature of Attorney*</b></p> <p>X <u>N/A</u>                  Signature of Attorney for Debtor(s)</p> <p>_____                  Printed Name of Attorney for Debtor(s)</p> <p>_____                  Firm Name</p> <p>_____                  Address</p> <p>_____                  Telephone Number</p> <p>_____                  Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p><u>N/A</u>                  Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____                  Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____                  Address</p> <p>X <u>N/A</u>                  Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</small></p>	
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>N/A</u>                  Signature of Authorized Individual</p> <p>_____                  Printed Name of Authorized Individual</p> <p>_____                  Title of Authorized Individual</p> <p>_____                  Date</p>		

B 1D (Official Form 1, Exhibit D) (12/08)

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: \_\_\_\_\_

*Kirsten Jensen*

Date: 10/2/09

B6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court

Northern District of Illinois

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Y	1	\$ 0.00		
B - Personal Property	Y	3	\$ 7,291.00		
C - Property Claimed as Exempt	Y	1			
D - Creditors Holding Secured Claims	Y	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Y	3		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Y	24		\$ 62,276.13	
G - Executory Contracts and Unexpired Leases	Y	1			
H - Codebtors	Y	1			
I - Current Income of Individual Debtor(s)	Y	1			\$ 1,726.45
J - Current Expenditures of Individual Debtors(s)	Y	1			\$ 1,685.00
TOTAL			\$ 7,291.00	\$ 62,276.13	

B 6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court

Northern District of Illinois

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	<b>\$ 0.00</b>

### State the following:

Average Income (from Schedule I, Line 16)	\$ 1,726.45
Average Expenses (from Schedule J, Line 18)	\$ 1,685.00
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20)	\$ 2,495.92

### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 62,276.13
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 62,276.13

B6A (Official Form 6A) (12/07)

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM

Total ►  
(Report also on Summary of Schedules.)



In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash (in debtors possession)		20.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		TCF Checking Account		1.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Landlord (1322 Dearbron St., Joliet, IL)		995.00
4. Household goods and furnishings, including audio, video, and computer equipment.		Misc. household goods and furnishings (in debtors possession)		250.00
5. Books: pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books and videos (indebtors possession)		150.00
6. Wearing apparel.		Misc. wearing apparel of debtor and dependent		375.00
7. Furs and jewelry.	x			
8. Firearms and sports, photographic, and other hobby equipment.	x			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10. Annuities. Itemize and name each issuer.	x			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			

In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

In re Kirsten M. Jensen,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2000 Chevy Cavalier, 1991 Toyota Pickup, 2003 Mitsubishi Galant		5,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
2 continuation sheets attached Total				\$ 7,291.00

(Include amounts from any continuation  
sheets attached. Report total also on  
Summary of Schedules.)

In re Kirsten M. Jensen,  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

- ☐ 11 U.S.C. § 522(b)(2)  
☒ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds  
 \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Cash	735ILCS 5/12-1001 (b)	20.00	20.00
Household goods	735ILCS 5/12-1001 (b)	250.00	250.00
Wearing apparel	735ILCS 5/12-1001 (a)	375.00	375.00
Book and videos	735ILCS 5/12-1001 (a)	150.00	150.00
2000 Chevy Cavalier	735 ILCS 5/12-1001 (c)	1,000.00	1,000.00
1991 Toyota pickup	735 ILCS 5/12-1001 (c)	1,000.00	1,000.00
2003 Mitsubishi Galant	735 ILCS 5/12-1001 (c)	3,500.00	3,500.00
TCF Bank - checking account	735ILCS 5/12-1001 (b)	1.00	1.00

B 6D (Official Form 6D) (12/07)

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(If known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.



Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
Subtotal ► (Total of this page)							\$	\$
Total ► (Use only on last page)							\$	\$

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

continuation sheets  
attached

B 6E (Official Form 6E) (12/07)

In re Kirsten M. Tensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

B 6E (Official Form 6E) (12/07) – Cont.

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

\_\_\_\_\_ continuation sheets attached

B 6E (Official Form 6E) (12/07) - Cont.

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
(if known)

# **SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS** (Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Account No.									
Account No.									
Account No.									
Sheet no. _____ of _____ continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals➤ (Totals of this page)	\$	\$
Total➤ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals➤ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								\$	\$



In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2188836 Hinsdale Family Medical 911 Elm St., Ste. 215 Hinsdale IL 60521			Medical				781.00
ACCOUNT NO. 08-061703278 Merchants Credit 223 W Jackson Blvd Chicago IL 60606			Medical (Collection for Hinsdale Family Medical)				296.00
ACCOUNT NO. 08-061520012 Merchants Credit 223 W Jackson Blvd Chicago IL 60606			Medical (Collection for Hinsdale Family Medical)				178.00
ACCOUNT NO. JenseK4276 David J Rubis, DDS & Assoc 2241 Theodore St Joliet IL 60435			Dental				25.57
Subtotal▶							\$1,280.57
Total▶ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							\$

24 continuation sheets attached

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

—

In re Kirsten M. Tensen  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3130000409224			Collection (Washington Mutual Bank- checking account #313-409224-0)				738.20
RJM Acquisitions PO Box 18006 Hanppauge NY 11788							
ACCOUNT NO. G6781374			Collection (Washington Mutual Bank- checking account #313-409224-0)				738.20
ERS Solutions PO Box 9004 Renton WA 98057							
ACCOUNT NO. 313-409224-0			NSF transaction				375.00
Washington Mutual Bank PO Box 1097 Northridge CA 01328							
ACCOUNT NO. 013281097			NSF bad check				774.99
Meijer (Attn Returned Checks) PO Box I Grand Rapids MI 49501							
ACCOUNT NO. 3706289372162			Collection (Walmart - NSF bad check)				222.98
TRS Recovery Service PO Box 60022 City of Industry CA 91716							
Sheet no. <u>4</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>2,849.37</u>
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total ▶ \$ _____

In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			NSF bad check				222.98
Walmart Store #2956							
ACCOUNT NO. 6021677163			Utility bill				711.57
Nicor PO Box 2020 Aurora IL 60507							
ACCOUNT NO. 35016481030			Collection (Nicor)				145.03
RMA PO Box 105411 Atlanta GA 30348							
ACCOUNT NO. 8798201440236			Cable Utility bill				351.83
Comcast							
ACCOUNT NO. 01296886743			Collection (Comcast-cable)				439.56
Credit Protection Assoc.							
Sheet no. <u>5</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>1,870.97</u>
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total ▶ \$ _____

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 714034172			Phone				787.51
US Cellular PO Box 0203 Palatine IL 60055							
ACCOUNT NO. 0907019178			Water Utility bill				36.98
IL American Water PO Box 578 Alton IL 62002							
ACCOUNT NO. 5716154			Collection (Nextel)				174.06
First Revenue Assurance PO Box 5818 Denver CO 80217							
ACCOUNT NO. 10687777			Collection (Sprint)				286.35
Calvary Portfolio Service PO Box 1017 Hawthorne NY 10532							
ACCOUNT NO. 01584675901			Collection (Sprint)				174.06
Afni 404 Brock Dr., PO Box 3517 Bloomington IL 61702							
Sheet no. <u>6</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 1,458.96
							Total▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5019969			Collection (AT&T)				287.82
OSI Collection Service PO Box 933 Brookfield WI 53008							
ACCOUNT NO. 3318110287301			Collection (AT&T)				287.82
Goggins & Lavintman 3140 Neil Armstrong Blvd Eagan MN 55121							
ACCOUNT NO. 55221271030			Collection (AT&T)				287.82
RMA PO Box 105153 Atlanta GA 30348							
ACCOUNT NO. 12262621001			Phone service				58.77
Sage Telecom PO Box 79051 Phoenix AZ 85062							
ACCOUNT NO. 8157240304621			Phone service				202.38
MTI-IL PO Box 2049 Matteson IL 60443							
Sheet no. <u>7</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>1,124.61</u>
							Total ▶ \$

(Use only on last page of the completed Schedule F.)  
 (Report also on Summary of Schedules and, if applicable on the Statistical  
 Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8515288669			Collection (SBC Ameritech)				592.89
MCM-Dept 12421 PO Box 603 Paks PA 19456							
ACCOUNT NO. 3542529			Collection (SBC Ameritech)				592.89
True Logic PO Box 4437 Engelwood CO 80155							
ACCOUNT NO. 8758326			Collection (MCI Worldcom)				75.25
PMS PO Box 2220 West Covina CA 91793							
ACCOUNT NO. 81572644150			Phone service				51.68
Consolidated Communications, PO Box 2564Decatur IL 62525							
ACCOUNT NO. 8157240304			Phone service				98.65
Telecom USA PO Box 600670 Jacksonville FL 32260							
Sheet no. <u>8</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>1,411.36</u>
							Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



Page 25 of 76

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 700 N Raynor			Rent charges				2,575.00
Mike Freeman PO ox 765 New Lenox IL 60451							
ACCOUNT NO. 534398			Gas Line Comfort Guard Utility bill				15.00
ERS Solutions PO Box 9004 Renton WA 98057							
ACCOUNT NO. 2173592817000			Blockbuster				27.92
Credit Protection 13355 Noel Rd Dallas TX 75240							
ACCOUNT NO. 03A0855985837			Collection (BMG Music)				56.48
Merchants Credit Guide 223 W Jackson Blvd Chicago IL 60606							
ACCOUNT NO. 5T0245			Collection (Columbia House)				119.80
NCO Financial Systems PO Box 41417, Dept 99 Philadelphia PA 19101							
Sheet no. <u>9</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>2,794.20</u>
							Total▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. NV10111000074  North Shore Agency PO Box 8901 Westbury NY 11590			Collection (Vibe magazine subscription)				17.95
ACCOUNT NO. N7E0215000233  North Shore Agency PO Box 8901 Westbury NY 11590			Collection (ESPN magazine subscription)				11.97
ACCOUNT NO.  Ebony PO Box 56480 Boulder CO 80322			Magazine subscription				22.00
ACCOUNT NO. JNS21909 RAY9  GC Services PO Box 3026, 6330 Gulfon Houston TX 77253			Collection (Cosmopolitan magazine subscription)				24.97
ACCOUNT NO. 8P797C  NCO Financial Systems PO Box 15630, Sept 99 Wilmington DE 19850			Collection (U-Haul truck rental)				140.17
Sheet no. <u>10</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>217.06</u>
							Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30600406			Truck rental				140.17
UHaul Int'l - Payment Processing- PO Box 21501 Phoeniz AZ 85036							
ACCOUNT NO. 00015006			Truck rental				190.17
UHaul Int'l - Payment Processing - PO Box 52128 Phoenix AZ 85072							
ACCOUNT NO. 00015006			Truck rental				103.45
UHaul Int'l - Payment Processing - PO Box 52128 Phoenix AZ 85072							
ACCOUNT NO.			Collection (Kohl's department store)				837.42
RMA 802 E Martintown Rd., Ste 201,North Augusta SC 29841							
ACCOUNT NO. 5488975012161			Credit card				831.93
Household Bank PO Box 80084 Salina CA 93912							
Sheet no. <u>11</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>2,103.14</u>
							Total▶ \$
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5488975012161			Collection (Household Bank credit card)				759.12
GS Service Ltd 6330 Gulfon Houston TX 77081							
ACCOUNT NO. 8505973054			Collection (Household Bank credit card)				907.23
MCM PO Box 939019 San Diego CA 92193							
ACCOUNT NO. 5197707			Collection (Collins Financial)				432.00
Paragon Way PO Box 42829 Austin TX 78704							
ACCOUNT NO. 5365057			Collection (Collins Financial)				1,088.09
Paragon Way PO Box 42829 Austin TX 78704							
ACCOUNT NO. 168087			City of Joliet Utility				34.71
Cab Services 60 Barney Dr Joliet IL 60435							
Sheet no. <u>12</u> of <u>28</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>3,221.15</u>
							Total▶ \$
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. DC0027025180			Medical				75.00
Provena St Joseph Medical Center- 75 Remittance Dr., Ste 1959, Chicago IL 60675							
ACCOUNT NO. 83146			Medical				25.00
Associated Pathologists of Joliet- PO Box 1509 Elgin IL 60121							
ACCOUNT NO. 9000000009097			Medical				260.00
AHFMC Bolingbrook Medical PO Box 7003 Bolingbrook IL 60440							
ACCOUNT NO. 3348065023199			Medical				301.00
Prairie Emergency Services PO Box 635225 Cincinnati OH 45263							
ACCOUNT NO. 1526448123199			Medical				48.00
Prairie Emergency Services PO Box 635225 Cincinnati OH 45263							
Sheet no. <u>13</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>709.00</u>
							Total▶ \$

(Use only on last page of the completed Schedule F.)  
 (Report also on Summary of Schedules and, if applicable on the Statistical  
 Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. H7463753001			Medical				102.25
Adventist PO Box 9247 Oakbrook IL 60522							
ACCOUNT NO. A0200510234			Medical				111.10
Adventist PO Box 9247 Oakbrook IL 60522							
ACCOUNT NO. 990200550234			Medical				147.00
Emergency Healthcare- 200 E Chicago Ave., Ste 202, Westmont IL 60559							
ACCOUNT NO. 866084			Medical				147.00
Tri County PO Box 515 Wheaton IL 60189							
ACCOUNT NO. 990296205149			Medical				200.60
Emergency Healthcare 39182 Treasury Center Chicago IL 60694							
Sheet no. <u>14</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>707.95</u>
Total ▶ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							\$

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. E020336905			Medical				493.50
Edwards Hospital PO Box 4207 Carol Stream IL 60197							
ACCOUNT NO. D33003697			Medical				37.50
Dupage Radiologists PO Box 70 Hinsdale IL 60521							
ACCOUNT NO. 013000088740			Medical				108.77
Associated Pathologists of Joliet- 330 Madison St., Ste 2004, Joliet IL 60434							
ACCOUNT NO. 4144018			Medical				133.20
NACS 2810 Walker Rd., Ste 100 Chattanooga TN 37421							
ACCOUNT NO. 6205149			Medical				133.20
Adventist Hinsdale Hospital PO Box 9247 Oakbrook IL 60522							
Sheet no. <u>15</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>906.17</u>
							Total▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

B 6F (Official Form 6F) (12/07) - Cont.

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1031070373			Medical				175.00
AMCA 2269 S Sawmill River Rd, Bldg 3Elmsford NY 10523							
ACCOUNT NO. 038553Y AABBB			Medical				301.00
HRRG PO Box 189053 Plantation FL							
ACCOUNT NO. DC0026832045			Medical				729.42
Revenue Cycle Partners 2870 Stones Ct., Ste 300 North Liberty IA 52317							
ACCOUNT NO. DC0026832045			Medical				729.42
Provena Health 75 Remittance Dr., Ste 1366 Chicago IL 60675							
ACCOUNT NO. 2188836114033			Medical				474.00
Hinsdale Fmailly Medicine 911 N Elm St., Ste 215 Hinsdale IL 60521							
Sheet no. <u>16</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ <u>2,408.84</u>
							Total▶ \$
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							



In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 08070722382			Collection (Medical bill)				504.00
Merchants Credit Guide 223 W Jackson Blvd Chicago IL 60606							
ACCOUNT NO.			Medical				211.00
Adventists Hinsdale PO Box 9247 Oakbrook IL 60522							
ACCOUNT NO. 321763381			Medical				44.60
Genesis 3231 S Euclid Ave Berwyn IL 60402							
ACCOUNT NO. DC0026832045			Collection (Medical bill)				729.42
Mira Med Revenue Group PO Box 536 Linden MI 48451							
ACCOUNT NO. 7353555			Medical				243.00
Adventists Hinsdale Hosp. PO Box 9247 Oakbrook IL 60522							
Sheet no. <u>17</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>1,732.02</u>
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total ▶ \$ 

B 6F (Official Form 6F) (12/07) - Cont.

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7353458 Adventists Hinsdale Hosp. PO Box 9247 Hinsdale IL 60522			Medical				50.63
ACCOUNT NO. 21461 Associated Pathologists of Joliet- 330 N Madison St., Ste 200, Joliet IL 60435			Medical				25.00
ACCOUNT NO. DC00271011654 Provena Health 333 N Madison St Joliet IL 60435			Medical				652.47
ACCOUNT NO. 8021000187872 Dupage Pathologists Assoc. 520 E 22nd Street Lombard IL 60148			Medical				33.00
ACCOUNT NO. 7353458 Adventists PO Box 1965 Southgate MI 48195			Medical				293.63

Sheet no. 18 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal ▶ \$  
1,054.73

Total ▶ \$  
(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBITOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0399592324			Collection (Medical bill)				436.59
CMI 4200 Int'l Parkway Carrollton TX 75007							
ACCOUNT NO. H7441685001			Medical				304.45
Adventist PO Box 9247 Oakbrook IL 60522							
ACCOUNT NO. DC0027025180			Medical				882.36
Provena 333 N Madison St Joliet IL 60435							
ACCOUNT NO. H7441683001			Medical				298.00
Adventist PO Box 9247 Oakbrook IL 60522							
ACCOUNT NO. 1498900			Medical				909.30
Dr Uditt Mukherjee & Assoc. 3340 Mall Loop Dr. (in Sears) Joliet IL 60435							
Sheet no. <u>19</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>2,830.70</u>
Total ▶ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							\$

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 10729234 Van Ru Credit PO Box 46549 Lincolnwood IL 60646			Collection (ComEd Utility)				714.16
ACCOUNT NO. 217029-7 RDC Financial 1785 Locust Ave., #112 Pasadena CA 91106			Collection (MTI Phone)				119.83
ACCOUNT NO. 33179195 City of Chicago PO Box 88292 Chicago IL 60680			Ticket violation				50.00
ACCOUNT NO. 15267 All Credit Lenders 1924 Plainfield Rd Crest Hill IL 60435			Wage garnishment (Loan)				3,757.84
ACCOUNT NO. 09 SC1543 Eckhoff & Massarelli 330 S Naperville Rd., #408 Wheaton IL 60187			Wage garnishment (All Credit Lenders-loan)				3,757.84
Sheet no. <u>20</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>8,399.67</u>
							Total ▶ \$ _____ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8073330752			Collection (Adventist Hinsdale Hospital)				133.00
Merchants Credit Guide 223 W Jackson Blvd Chicago IL 60606							
ACCOUNT NO. 8080870835			Collection (Adventist Hinsdale Hospital)				147.00
Merchants Credit Guide 223 W Jackson Blvd Chicago IL 60606							
ACCOUNT NO. 5111852			Collection (Provena St Joseph Medical)				729.00
Pellettieri and Assoc. 991 Oak Creek Dr Lombard IL 60148							
ACCOUNT NO. 744443901			Collection (US Cellular)				1,176.00
Valentine & Kebartas Inc 15 Union St Lawrence MA 01840							
ACCOUNT NO. 3L M2465		J	Judgement (Libovicz Apts-rent charges)				1,500.00
Will Law Magistrate Court 14 W Jefferson St Joliet IL 60432							
Sheet no. 21 of 25 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ 3,685.00
							Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Chuck Bretz & Assoc. 58 N Chicago St., 2nd Flr Joliet IL 60432							1,250.00
ACCOUNT NO. 0237919			Parking violation				
Village of Bolingbrook 375 W Briarcliff Rd Bolingbrook IL 60440							75.00
ACCOUNT NO. 0202875			Parking violation				
Village of Bolingbrook 375 W Briarcliff Rd Bolingbrook IL 60440							75.00
ACCOUNT NO. 0231977			Parking violation				
Village of Bolingbrook 375 W Briarcliff Rd Bolingbrook IL 60440							75.00
ACCOUNT NO. 501000221			Parking violation				
City of Joliet 150 W Jefferson St Joliet L 60432							3.00
Sheet no. <u>22</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 1,478.00
							Total▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Robert Wisniewski, Atty 81 N Chicago St Joliet IL 60435			Represents Leonard & Jean Facchina - rental property 210 Frank Ave, Joliet)				1,149.00
ACCOUNT NO. 9760351							
Collection Company 700 Longwater Dr Norwell MA 02061			Collection (Village of Bolingbrook ticket violation)				95.00
ACCOUNT NO. 149122							
Lou Harris Company 613 Academy Dr Northbrook IL 60062			Collection (Sears Dental, Joliet)				909.00
ACCOUNT NO. 489328							
Cab Services Inc 60 Barney Dr Joliet IL 60435			Collection (City of Joliet Utility)				121.00
ACCOUNT NO. 479528							
Cab Services Inc 60 Barney Dr Joliet IL 60435			Collection (City of Joliet parking violation)				70.00
Sheet no. <u>23</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>2,344.00</u>
							Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7957629			Collection (Village of Bolingbrook-parking violation)				150.00
CCA PO Box 806 Norwell MA 02061							
ACCOUNT NO. 7957628			Collection (Village of Bolingbrook-parking violation)				150.00
CCA PO Box 806 Norwell MA 02061							
ACCOUNT NO. jensen kirsten			Collection City of Joliet-parking violation)				40.00
CDA PO Box 213 Streator IL 61364							
ACCOUNT NO. 1030312755			Collection City of Joliet-parking violation)				28.00
CDA PO Box 213 Streator IL 61364							
ACCOUNT NO.			Judgement (for rental property - 210 Frank Ave, Joliet)				1,149.00
Leonard & Jean Facchina 210 Frank Ave Joliet IL							
Subtotal▶							\$ 1,517.00
Total▶							\$

Sheet no. 24 of 25 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



In re \_\_\_\_\_,

Case No. \_\_\_\_\_

Debtor

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 47085			Car Loan(2003 Nissan Maxima)				14,901.00
Regional Acceptance Corp 304 Kellm Road Virginia Beach, VA 23462							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. <u>25</u> of <u>25</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 14,901.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							Total▶ \$ 62,276.13

B 6G (Official Form 6G) (12/07)

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Lessor Ken & Karen Svihla	Lessee: Kirsten M. Jensen Lease residence at 1322 Dearborn St. Joliet, IL 60435.

B 6H (Official Form 6H) (12/07)

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B61 (Official Form 61) (12/07)

In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Kaili Jensen	AGE(S): <del>19</del> 18
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	Administrative Assistant	
Name of Employer	Services of Will Grundy & Kankakee Cty's	
How long employed	8 yrs	
Address of Employer	1740 McDonough St. Joliet, IL 60436	

INCOME: (Estimate of average or projected monthly income at time case filed)

DEBTOR SPOUSE

1. Monthly gross wages, salary, and commissions  
(Prorate if not paid monthly)
2. Estimate monthly overtime

\$ 2,495.92 \$ \_\_\_\_\_\$ 0.00 \$ \_\_\_\_\_

## 3. SUBTOTAL

\$ 2,495.92 \$ \_\_\_\_\_

## 4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify): wage garnishment

\$ 308.36 \$ \_\_\_\_\_\$ 141.14 \$ \_\_\_\_\_\$ 0.00 \$ \_\_\_\_\_\$ 187.19 \$ \_\_\_\_\_

## 5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 1,726.45 \$ \_\_\_\_\_

## 6. TOTAL NET MONTHLY TAKE HOME PAY

\$ 1,726.45 \$ \_\_\_\_\_

7. Regular income from operation of business or profession or farm  
(Attach detailed statement)
8. Income from real property
9. Interest and dividends
10. Alimony, maintenance or support payments payable to the debtor for  
the debtor's use or that of dependents listed above
11. Social security or government assistance  
(Specify): \_\_\_\_\_
12. Pension or retirement income
13. Other monthly income  
(Specify): \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

## 14. SUBTOTAL OF LINES 7 THROUGH 13

\$ \_\_\_\_\_ \$ \_\_\_\_\_

## 15. AVERAGE MONTHLY INCOME (Add amounts on lines 6 and 14)

\$ 1,726.45 \$ \_\_\_\_\_

## 16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ \_\_\_\_\_

(Report also on Summary of Schedules and, if applicable,  
on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☒ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	995.00
a. Are real estate taxes included? Yes _____ No <input checked="" type="checkbox"/>		
b. Is property insurance included? Yes _____ No <input checked="" type="checkbox"/>		
2. Utilities: a. Electricity and heating fuel	\$	145.00
b. Water and sewer	\$	45.00
c. Telephone	\$	75.00
d. Other <u>cable tv</u>	\$	50.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	150.00
5. Clothing	\$	75.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	100.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other _____	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other _____	\$	0.00
c. Other _____	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other _____	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	1,685.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		

### 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	1,726.45
b. Average monthly expenses from Line 18 above	\$	1,685.00
c. Monthly net income (a. minus b.)	\$	41.45

In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(if known)**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 38 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 10/2/09Signature: Kirsten Jensen  
Debtor

Date \_\_\_\_\_

Signature: \_\_\_\_\_  
(Joint Debtor, if any)

{If joint case, both spouses must sign.}

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

N/APrinted or Typed Name and Title, if any,  
of Bankruptcy Petition PreparerSocial Security No. \_\_\_\_\_  
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_

X N/A

Signature of Bankruptcy Petition Preparer

Date \_\_\_\_\_

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: N/A\_\_\_\_\_  
{Print or type name of individual signing on behalf of debtor.}

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B 7 (Official Form 7) (12/07)

# UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re: Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

### I. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### AMOUNT

#### SOURCE

2009	\$19,967.00	Employer- Services of Will Grundy & Kankakee Counties Inc .
2008	29,950	" "
2007	29,000	" "

**2. Income other than from employment or operation of business**

None  
☒

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

**3. Payments to creditors**

*Complete a. or b., as appropriate, and c.*

None  
☒

*a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF  
PAYMENTS

AMOUNT  
PAID

AMOUNT  
STILL OWING

None  
☒

*b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF  
PAYMENTS/  
TRANSFERS

AMOUNT  
PAID OR  
VALUE OF  
TRANSFERS

AMOUNT  
STILL  
OWING



None



c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
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#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
09SC1543 All Creditor Lenders	Wage garnishment	Will County	Judgement
45C5916 Cottonwood Fin.	Collections	Will County	Judgement
3LM2465 Liboviez Apt	Collections	Will County	Judgement
05LM2664 Facchina LLC	Collections	Will County	Judgement

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
Regional Acceptance Corp 304 Kellm Rd Virginia Beach, VA 23462	July, 2006	14,901.00

**6. Assignments and receiverships**

None  
☒

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None  
☒

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

None  
☒

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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**8. Losses**

None  
☒

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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**9. Payments related to debt counseling or bankruptcy**

None  
☒

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**10. Other transfers**

None  
☒

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None  
☒

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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**11. Closed financial accounts**

None  
☐

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
Washington Mutual	Checking account # 313-409224-0, \$738.00	738.00 closed 9/06

**12. Safe deposit boxes**

None  
☒

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None  
☒

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None  
☒

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None  
☐

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
1322 Dearborn St., Joliet IL	Kiri Jensen	3/08- to present
819 Raynor Ave., Joliet IL	Kiri Jensen	3/07-3/08

**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight** years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18. Nature, location and name of business**

None



a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing

executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

#### 19. Books, records and financial statements

None ☒ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
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None ☒ b. List all firms or individuals who within **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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None  
☒

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None  
☒

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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**20. Inventories**

None  
☒

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT  
OF INVENTORY  
(Specify cost, market or other  
basis)

None  
☒

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES  
OF CUSTODIAN  
OF INVENTORY RECORDS

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**21 . Current Partners, Officers, Directors and Shareholders**

None  
☒

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None  
☒

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIP

**22 . Former partners, officers, directors and shareholders**

None  
☒

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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None  
☒

b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23 . Withdrawals from a partnership or distributions by a corporation**

None  
☒

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

None  
☒

If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER-IDENTIFICATION NUMBER (EIN)
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**25. Pension Funds.**

None  
☒

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER-IDENTIFICATION NUMBER (EIN)
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\* \* \* \* \*



B 21 (Official Form 21) (12/07)

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois

In re Kirsten M. Jensen, )  
[Set forth here all names including married, maiden, )  
and trade names used by debtor within last 8 years] )  
Debtor ) Case No. \_\_\_\_\_  
Address 1322 Dearborn Street )  
Joliet, IL 60435 ) Chapter 7  
Last four digits of Social-Security or Individual Taxpayer- )  
Identification (ITIN) No(s), (if any): )  
3381 )  
Employer Tax-Identification (EIN) No(s), (if any): )

**STATEMENT OF SOCIAL-SECURITY NUMBER(S)**  
(or other Individual Taxpayer-Identification Number(s) (ITIN(s)))\*

1. Name of Debtor (Last, First, Middle): Jensen, Kirsten M.  
(Check the appropriate box and, if applicable, provide the required information.)

- ☒ Debtor has a Social-Security Number and it is: 321-76-3381  
(If more than one, state all.)
- ☐ Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN), and it is: \_\_\_\_\_  
(If more than one, state all.)
- ☐ Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification Number (ITIN).

2. Name of Joint Debtor (Last, First, Middle): \_\_\_\_\_  
(Check the appropriate box and, if applicable, provide the required information.)

- ☐ Joint Debtor has a Social-Security Number and it is: \_\_\_\_\_  
(If more than one, state all.)
- ☐ Joint Debtor does not have a Social-Security Number but has an Individual Taxpayer-Identification Number (ITIN) and it is: \_\_\_\_\_  
(If more than one, state all.)
- ☐ Joint Debtor does not have either a Social-Security Number or an Individual Taxpayer-Identification Number (ITIN).

I declare under penalty of perjury that the foregoing is true and correct.

X Kirsten Jensen 10/2/09  
Signature of Debtor Date

X \_\_\_\_\_  
Signature of Joint Debtor Date

\* Joint debtors must provide information for both spouses.

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.

B 8 (Official Form 8) (12/08)

# UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
Chapter 7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** – Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

Property No. 1	
<b>Creditor's Name:</b> N/A	<b>Describe Property Securing Debt:</b>
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 2 <i>(if necessary)</i>	
<b>Creditor's Name:</b> N/A	<b>Describe Property Securing Debt:</b>
Property will be <i>(check one)</i> : <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to <i>(check at least one)</i> : <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is <i>(check one)</i> : <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 10/2/09 Signature of Debtor Kirsten Jensen

Date \_\_\_\_\_ Signature of Joint Debtor (if any) \_\_\_\_\_

*[If completed on behalf of a partnership or corporation]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date \_\_\_\_\_ Signature \_\_\_\_\_ N/A \_\_\_\_\_  
 \_\_\_\_\_  
 Print Name and  
 Title

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

continuation sheets attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

N/A

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social-Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal, responsible person, or partner who signs this document.

Address

N/A

Signature of Bankruptcy Petition Preparer

Date \_\_\_\_\_

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.*

B 8 (Official Form 8) (12/08)

Page 2

**PART B** – Personal property subject to unexpired leases. *(All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)*

Property No. 1		
<b>Lessor's Name:</b> Ken & Karen Svihla	<b>Describe Leased Property:</b> 1322 Dearborn St., Joliet IL	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

  0   continuation sheets attached *(if any)*

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date: 10/2/09

Kirsten Jensen  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

B 6B (Official Form 6B) (12/07)

In re Kirsten M. Jensen,  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash (in debtors possession)		20.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home-stead associations, or credit unions, brokerage houses, or cooperatives.		TCF Checking Account		1.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Landlord (1322 Dearbron St., Joliet, IL)		995.00
4. Household goods and furnishings, including audio, video, and computer equipment.		Misc. household goods and furnishings (in debtors possession)		250.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books and videos (indebtors possession)		150.00
6. Wearing apparel.		Misc. wearing apparel of debtor and dependent		375.00
7. Furs and jewelry.	x			
8. Firearms and sports, photographic, and other hobby equipment.	x			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10. Annuities. Itemize and name each issuer.	x			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			

B 6B (Official Form 6B) (12/07) -- Cont.

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A -- Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

B 6B (Official Form 6B) (12/07) -- Cont.

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2000 Chevy Cavalier, 1991 Toyota Pickup, 2003 Mitsubishi Galant		5,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
2 continuation sheets attached Total				\$ 7,291.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

B6I (Official Form 6I) (12/07)

In re Kirsten M. Jensen  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Kaili Jensen	AGE(S): 19
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	Administrative Assistant	
Name of Employer	Services of Will Grundy & Kankakee Cty's	
How long employed	8 yrs	
Address of Employer	1740 McDonough St.	
	Joliet, IL 60436	

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
	\$ <u>2,495.92</u>	\$ _____
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$ <u>0.00</u>	\$ _____

2. Estimate monthly overtime

3. SUBTOTAL

\$ <u>2,495.92</u>	\$ _____
--------------------	----------

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ <u>308.36</u>	\$ _____
------------------	----------

b. Insurance

\$ <u>141.14</u>	\$ _____
------------------	----------

c. Union dues

\$ <u>0.00</u>	\$ _____
----------------	----------

d. Other (Specify): wage garnishment

\$ _____	\$ _____
----------	----------

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <u>1,726.45</u>	\$ _____
--------------------	----------

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <u>1,726.45</u>	\$ _____
--------------------	----------

7. Regular income from operation of business or profession or farm  
(Attach detailed statement)

\$ _____	\$ _____
----------	----------

8. Income from real property

\$ _____	\$ _____
----------	----------

9. Interest and dividends

\$ _____	\$ _____
----------	----------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

\$ _____	\$ _____
----------	----------

11. Social security or government assistance  
(Specify): \_\_\_\_\_

\$ _____	\$ _____
----------	----------

12. Pension or retirement income

\$ _____	\$ _____
----------	----------

13. Other monthly income

\$ _____	\$ _____
----------	----------

(Specify): \_\_\_\_\_

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ _____	\$ _____
----------	----------

15. AVERAGE MONTHLY INCOME (Add amounts on lines 6 and 14)

\$ <u>1,726.45</u>	\$ _____
--------------------	----------

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ _____	\$ _____
----------	----------

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

\_\_\_\_\_



B6J (Official Form 6J) (12/07)

In re Kirsten M. Jensen  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☒ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 995.00
a. Are real estate taxes included? Yes _____ No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes _____ No <input checked="" type="checkbox"/>	
2. Utilities: a. Electricity and heating fuel	\$ 145.00
b. Water and sewer	\$ 45.00
c. Telephone	\$ 75.00
d. Other <u>cable tv</u>	\$ 50.00
3. Home maintenance (repairs and upkeep)	\$ 0.00
4. Food	\$ 150.00
5. Clothing	\$ 75.00
6. Laundry and dry cleaning	\$ 0.00
7. Medical and dental expenses	\$ 50.00
8. Transportation (not including car payments)	\$ 100.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 0.00
10. Charitable contributions	\$ 0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ 0.00
b. Life	\$ 0.00
c. Health	\$ 0.00
d. Auto	\$ 0.00
e. Other _____	\$ 0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$ 0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ 0.00
b. Other _____	\$ 0.00
c. Other _____	\$ 0.00
14. Alimony, maintenance, and support paid to others	\$ 0.00
15. Payments for support of additional dependents not living at your home	\$ 0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ 0.00
17. Other _____	\$ 0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<b>\$ 1,685.00</b>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I	\$ 1,726.45
b. Average monthly expenses from Line 18 above	\$ 1,685.00
c. Monthly net income (a. minus b.)	\$ 41.45

Hinsdale Family Medical  
911 Elm St, Ste 215  
Hinsdale, IL 60521

Merchants Credit  
223 W. Jackson Blvd  
Chicago, IL 60606

Merchants Credit  
223 W. Jackson Blvd  
Chicago, IL 60606

David J Rubis, DDS & Associates  
2241 Theodore St  
Joliet, IL 60435

North Hammes Family Dental  
227 N Hammes  
Joliet, IL 60435

Essington Family Dental  
692 Essington Rd, Ste A  
Joliet, IL 60435

Transworld Systems Inc  
25 Northwest Point Blvd #750  
Elk Grove Village, IL 60007

Malinowski & Sefcik DDS Ltd  
2112 W Jefferson St, Rm 208  
Joliet, IL 60435

Troy Dental  
968 Brook Forest Ave, B1  
Shorewood, IL 60431

City of Chicago  
Department of Revenue  
PO Box 88292  
Chicago, IL 60680

City of Chicago  
Department of Revenue  
PO Box 88292  
Chicago, IL 60680

Linebarger Goggan Blairs  
Sampson LLP, PO Box 06152  
Chicago, IL 60606

TRS Recovery Service  
5251 Westheimer  
Houston, TX 77056

Steve & Barry's  
Store 108

RJM Acquisitions  
PO Box 18006  
Hanppauge, NY 11788

ERS Solutions  
PO Box 9004  
Renton, WA 98057

Washington Mutual Bank  
PO Box 1097  
Northridge, CA 01328

Meijer- Attn Returned Checks  
PO Box 1  
Grand Rapids, MI 49501

TRS Recovery Service  
PO Box 60022  
City of Industry, CA 91716

Walmart Store  
#2956

Nicor  
PO Box 2020  
Aurora, IL 60507

RMA  
PO Box 105411  
Atlanta, GA 30348

Comcast

Credit Protection Assoc.

US Cellular  
PO Box 0203  
Palatine, IL 60055

IL American Water  
PO Box 578  
Alton, IL 62002

First Revenue Assurance  
PO Box 5818  
Denver, CO 80217

Calvary Portfolio Service  
PO Box 1017  
Hawthorne, NY 10532

AFNI  
404 Brock Dr. PO Box 3517  
Bloomington, IL 61702

OSI Collection Service  
PO Box 933  
Brookfield, WI 53008

Goggins & Lavintman  
3140 Neil Armstrong Blvd  
Eagan, MN 55121

RMA  
PO Box 105153  
Atlanta, GA 30348

Sage Telecom  
PO Box 79051  
Phoenix, AZ 85062

MTI-IL  
PO Box 2049  
Matteson, IL 60443

MCM-Dept 12421  
PO Box 603  
Paks, PA 19456

True Logic  
PO Box 4437  
Englewood, CO 80155

PMS  
PO Box 2220  
West Covina, CA 91793

Consolidated Communications  
PO Box 2564  
Decatur, IL 62525

Telecom USA  
PO Box 600670  
Jacksonville, FL 32260

Mike Freeman  
PO Box 765  
New Lenox, IL 60451

ERS Solutions  
PO Box 9004  
Renton, WA 98057

Credit Protection  
13355 Noel Rd  
Dallas, TX 75420

Merchants Credit Guide  
223 W. Jackson Blvd  
Chicago, IL 60606

NCO Financial Systems  
PO Box 41417, Dept 99  
Philadelphia, PA 19101

North Shore Agency  
PO Box 8901  
Westbury, NY 11590

North Shore Agency  
PO Box 8901  
Westbury, NY 11590

Ebony  
PO Box 56480  
Boulder, CO 80322

GC Services  
PO Box 3026, 6330 Gulfton  
Houston, TX 77253

NCO Financial Systems  
PO Box 15630, Dept 99  
Wilmington, DE 19850

U'Haul Int - Payment Processing  
PO Box 21501  
Phoenix, AZ 85036

UHAUL  
PO Box 52128  
Phoenix, AZ 85072

UHAUL  
PO Box 52128  
Phoenix, AZ 85072

RMA  
802 E. Martintown Rd. Ste 201  
North Augusta, SC 29841

Household Bank  
PO Box 80084  
Salina, CA 93912

GS Service LTD  
6330 Gulfton  
Houston, TX 77081

MCM PO Box 939019  
San Diego, CA 92193

Paragon Way  
PO Box 42829  
Austin, TX 78704

Paragon Way  
PO Box 42829  
Austin, TX 78704

Cab Services  
60 Barney Dr  
Joliet, IL 60435

Provena St Joseph Medical Center  
75 Remittance Dr, Ste 1959  
Chicago, IL 60675

Associated Pathologists of Joliet  
PO Box 1509  
Elgin, IL 60121

AHFMC Bolingbrook Medical  
PO Box 7003  
Bolingbrook, IL 60440

Prairie Medical Services  
PO Box 635225  
Cincinnati, OH 45263

Prairie Emergency Services  
PO Box 635225  
Cincinnati, OH 45263

Adventist  
PO Box 9247  
Oakbrook, IL 60522

Adventist  
PO Box 9247  
Oakbrook, IL 60522

Emergency Healthcare  
200 E. Chicago Ave, Ste 202  
Westmont, IL 60559

Tri County  
PO Box 515  
Wheaton, IL 60189

Emergency Healthcare  
39182 Treasury Center  
Chicago, IL 60694

Edwards Hospital  
PO Box 4207  
Carol Stream, IL 60197

Dupage Radiologists  
PO Box 70  
Hinsdale, IL 60521

Associated Pathologists of Joliet  
330 Madison St., Ste 2004  
Joliet, IL 60434

NACS  
2810 Walker Rd, Ste 100  
Chattanooga, TN 37421

Adventist Hinsdale Hospital  
PO Box 9247  
Oakbrook, IL 60522

AMCA  
2269 S. Sawmill River Rd, Bldg 3  
Elmsford, NY 10523

HRRG  
PO Box 189053  
Plantation, FL

Revenue Cycle Partners  
2870 Stones Ct, Ste 300  
North Liberty, IA 52317

Provena Health  
75 Remittance Dr, Ste 1366  
Chicago, IL 60675

Hinsdale Family Medicine  
911 N Elm St, Ste 215  
Hinsdale, IL 60521

Merchants Credit Guide  
223 W Jackson Blvd  
Chicago, IL 60606

Adventists Hinsdale  
PO Box 9247  
Oakbrook, IL 60522

Genesis  
3231 Euclid Ave  
Berwyn, IL 60402



Mira Med Revenue Group  
PO Box 536  
Linden, MI 48451

Adventists Hinsdale Hosp  
PO Box 9247  
Oakbrook, IL 60522

Adventists Hinsdale Hosp  
PO Box 9247  
Oakbrook, IL 60522

Associated Pathologists of Joliet  
330 Madison St., Ste 2004  
Joliet, Il 60434

Provena Health  
333 N madison St  
Joliet, Il 60435

Dupage Pathologists  
520 E 22<sup>nd</sup> Street  
Lombard, IL 60148

Adventists  
PO Box 1965  
Southgate, MI 48195

CMI  
4200 Int'l Parkway  
Carrollton, TX 75007

Adventists  
PO Box 9247  
Oakbrook, IL 60522

Provena Health  
333 N madison St  
Joliet, Il 60435

Adventists  
PO Box 9247  
Oakbrook, IL 60522

Dr Uditt Mukherjee & Assoc  
3340 Mall Loop Dr (Sears)  
Joliet, Il 60435

Van Ru Credit  
PO Box 46459  
Lincolnwood, IL 60646

RDC Financial  
1785 Locust Ave, Ste 112  
Pasadena, CA 91106

City Of Chicago  
PO Box 88292  
Chicago, IL 60680

All Credit Lenders  
1924 Plainfield Rd  
Crest Hill, IL 60435

Eckhoff & Massarelli  
330 S. Naperville Rd #408  
Wheaton, IL 60187

Merchants Credit Guide  
223 W. Jackson Blvd  
Chicago, IL 60606

Merchants Credit Guide  
223 W. Jackson Blvd  
Chicago, IL 60606

Pellettieri & Assoc  
991 Oak Creek Dr  
Lombard, IL 60148

Valentine & Kebartas Inc  
15 Union St  
Lawrence, MA 01840

Will Law Magistrate Court  
14 W. Jefferson St  
Joliet, IL 60432

Chuck Bretz & Assoc  
58 N Chicago St., 2<sup>nd</sup> Floor  
Joliet, IL 60432

Village of Bolingbrook  
375 W Briarcliff Rd  
Bolingbrook, IL 60440

Village of Bolingbrook  
375 W Briarcliff Rd  
Bolingbrook, IL 60440

Village of Bolingbrook  
375 W Briarcliff Rd  
Bolingbrook, IL 60440

City of Joliet  
150 W Jefferson St  
Joliet, IL 60432

Robert Wisniewski  
81 N Chicago St  
Joliet, IL 60435

Lou Harris Company  
613 Academy Dr  
Northbrook, IL 60062

Cab Services  
60 Barney Dr  
Joliet, IL 60435

Cab Services  
60 Barney Dr  
Joliet, IL 60435

Collection Company  
700 Longwater Dr  
Norwell MA 02061

CCA  
PO Box 806  
Norwell, MA 02061

CCA  
PO Box 806  
Norwell, MA 02061

CDA  
PO Box 213  
Streator, IL 61364

Leonard & jean Facchina  
210 Frank Ave  
Joliet, Il 60435

Regional Acceptance  
304 Kellm Rd  
Virginia Beach, VA 23462